

Document	Indicator	Pages
Slip		
Endorsements		
Lloyds Wording	/	
ILU Wording		
CCP		
Cover Note		
Certificate		
Broker Listing		
Work-np Papers		
Other		



91147

		,	PID 91147
Policy Details:	·		-
	Assured		EXXON CORPORATION
		Code	EXX
	Policy No		1HB14910
	Period	From:	01-JAN-81
		To:	01-JAN-82
	Broker		C.T. BOWRING & CO., LTD.
		Code	509
	Limits:		100,000,000
·	Excess:		160,000,000
COMMENTS			DATE 16-DEC-97
			_



Lloyd's Policy

CON

Whereas the Assured named in the Schedule herein has paid the premium specified in the Schedule to the Underwriting Members of Lloyd's who have hereunto subscribed their Names (hereinafter called 'the Underwriters'),

Now We the Underwriters hereby agree to insure against loss, damage or liability to the extent and in the manner hereinafter provided.

If the Assured shall make any claim knowing the same to be false or fraudulent, as regards amount or otherwise, this Policy shall become void and all claim hereunder shall be forfeited.

Now know Ye that We the Underwriters, Members of the Syndicates whose definitive numbers in the after-mentioned List of Underwriting Members of Lloyd's are set out in the attached Table, hereby bind ourselves each for his own part and not one for another, our Heirs, Executors and Administrators and in respect of his due proportion only, to pay or make good to the Assured or to the Assured's Executors or Administrators or to indemnify him or them against all such loss, damage or liability as herein provided, after such loss, damage or liability is proved and the due proportion for which each of Us, the Underwriters, is liable shall be ascertained by reference to his share, as shown in the said List, of the Amount, Percentage or Proportion of the total sum insured hercunder which is in the Table set opposite the definitive number of the Syndicate of which such Underwriter is a Member AND FURTHER THAT the List of Underwriting Members of Lloyd's referred to above shows their respective Syndicates and Shares therein, is deemed to be incorporated in and to form part of this Policy, bears the number specified in the attached Table and is available for inspection at Lloyd's Policy Signing Office by the Assured or his or their representatives and a true copy of the material parts of the said List certified by the General Manager of Lloyd's Policy Signing Office will be furnished to the Assured on application.

In Witness whereof the General Manager of Lloyd's Policy Signing Office has subscribed his Name on behalf of each of Us.

KE6 Spathing

LLOYD'S POLICY SIGNING OFFICE,

J(A) NMA 2002 (11.4.74)

Form approved by Lloyd's Underwriters' Non-Marine Association.
Printed by Lloyd's of London Printing Services Ltd.

LLOYD'S
POLICY SIGNING,
OFFICE
EMBOSSMENT
APPEARS HERE
ON ORIGINAL
DOCUMENT
OCCUMENT

Schedule			
Policy or Certificate No. 1HB14910	Contract	No. (if any)	на160791
The name and address of the Assured	EXXON CORPORATION	N et al.	
		•	
The risk and sum insured hereunder	23.87% part of 10	00% of limit	s stated herein
and the second			1
	as attached		
·			
			•
The Premium U.S.\$29,837.50	part of V.S.\$125,00	0.00	
The period of Insurance from	as attached	to	as attached
both days inclusive, and for such fur	ther period or periods as	may be mutua	lly agreed upon

 ${
m J}$ or ${
m J}({
m A})$ (Schedule) NMA 2003 for attachment to NMA 2001, NMA 2002, NMA 2004 or NMA 2005

The Assured is requested to read this Policy and, if it is incorrect, return it immediately for alteration.

In all communications the Policy Number appearing in line one of the Schedule should be quoted.

In the event of any occurrence likely to result in a claim under this Policy, immediate notice should be given to:

Assured:

For account of EXXON CORPORATION and Affiliated Companies et al. and/or as Reinsurance of Ancon Insurance Company and Affiliated Companies et al. as underlying.

Conveyances:

Period:

12 calendar months at 00.00 hours 1st January, 1981 G.M.T.

Interest:

Broad Form Liabilities etc., as underlying, (including Aircraft Liability, Broad Form, Workmens Compensation/Employers Liability) and including sudden and accidental seepage and pollution on and offshore.

Sum Insured:

100% Limit of Liability U.S.\$100,000,000 each and every occurrence excess of U.S.\$160,000,000 each and every occurrence except:-

- (a) Where special step-down agreement applies as per wording.
- (b) Where underlying policies pay losses involving

(i) Marine Liabilities and/or

(ii) Coverage under Seepage and Pollution or 0.P.O.L. endorsement which not covered under this policy.

Trading:

Conditions:

As per Form of Underlying Policy or Policies insofar as applicable to the special terms of this insurance.

Premium:

100% Premium V.S.\$125,000.00

It is understood and agreed that the percentage signed by each Underwriting Syndicate is its proportion of 100% of limits stated herein $\frac{1}{2}$

Definitive Numbers of Syndicates and Amount, Percentage or Proportion of the Total Sum Insured hereunder shared between the Members of those Syndicates.

		-	-		-
FOR LPSO USE ONLY	BROKER	LPSO NO. & DATE	FOR LPSO USE ONLY	SHOKER	& DATE
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AMOUNT, PERCENTAGE OR PROPORTION	SYNDICATE	UNDERWRITER'S REF. PAGE	AMOUNT. PERCENTAGE OR PROPORTION	SYNDICATE	UNDERWRITER'S REF. PAGE
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PERCENT	1		PERCENT		
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Lloyd's Policy

R/N HA160791

a/c. EXXON CORPN.et al.

12 mos. @ 1/1/81



Lloyd's, London

NKT_0201 - POLICY/MARKET LISTING (Direct) Page 485 Assured : EXX EXXON CORPORATION Policy Number : 1HB14910 Period: 01-JAN-81 To 01-JAN-82 Policy Layer : 9 : 509 - C.T. BOWRING & CO., LTD. Coinsurance : 78.130000% Asbestos Costs : Pollution Costs : I Aggregate Extension: Primary : 0 Gurrenoy -Currency : USB - US BOLLARS
Policy Type : 222 - Unknown : USD Named Assured EXXON CORPORATION 01-JAN-81 D1-JAN-82 Policy Limits

EXXON CORPORATION

Typa Ciass Qual Value

CSL NP OCC 100000000

Excess

180,000,000

0

LDN 310,584 EXXON 00007

CAD CS

21-Jan-1998 03:43 PM

MKT_0201 - POLICY/MARKET LISTING (Direct)

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Assured : EXX EXXON CORPORATION

Policy Number : 1HB14910 Period : 01-JAN-81 To 01-JAN-82

Placement Information

Slip No : 1

Involvement : 100.00000%

Lead Company :

Aviation Code : Non-Marine Code : Marine Code : G Risk Code :

Market Lines

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Bureau	Insurer	Name	Line	Underwriter Reference	Status
L	812	SYNDICATE 812	2.720000	NAY21420J05	\$
L	972	SYNDICATE 972	.480000	NAV21420J05	\$
L	869	SYNDICATE 869	1.570000	NAV21420J05	S
L	493	SYNDICATE 493	.990000	NAV21420J05	S
L	127	SYNDICATE 127	5.970000	305	3
L	700	SYNDICATE 700	2.780000	305	S
L	273	SYNDICATE 273	1.190000	NAT502721J03	3
L	317	SYNDICATE 317	1.590000	LU74323J1101	8
L	368	SYNDICATE 368	1.790000	23J1823	3
L	412	SYNDICATE 412	.200000	23J1823	3
L	209	SYNDICATE 209	1.990000	91791721AX2	3
L	288	SYNDICATE 288	.400000	91791721AX2	3
L	065	SYNDIGATE 065	.680000	599x22J81	3
L	067	SYNDICATE 067	.120000	599X2ZJ81	3
L	448	SYNDICATE 448	.800000	7020000X22J1	\$
L	842	SYNDICATE 842	.600000	ND041H23J107	8
L	098	SYNDICATE U98	.090000	ND041H23J107	S

Total: 23.870000 % taken by 17 lines.